Fill in this inform	nation to identify	y your case:				
Debtor 1	Ervin First Name	Frank Middle Name	Layer Last Name	Che	eck if this is:	
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	_	An amended filing	
United States Bank	cruptcy Court for the: NORTHERN DISTRICT		STRICT OF TEXAS	🗆	A supplement showing postpetition chapter 13 income as of the following date	
Case number (if known)	17-32670-13				MM / DD / YYYY	

Official Form 106I

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1:	Describe	Employ	/ment
rait I.	Describe	LILIDIO	Allielif

١.	Fill in your employment information.		Deb	otor 1			Debtor 2 or non-l	filing spou	se
	If you have more than one job, attach a separate page with information about	Employment status		Employed Not employe	d		✓ Employed✓ Not employed	d	
	additional employers.	Occupation	Atte	orney			Teacher		
	Include part-time, seasonal, or self-employed work.	Employer's name	Spe	ecial Couns	el, Inc		Richardson ISE)	
	Occupation may include student or homemaker, if it applies.	Employer's address		51 Deerwoo	Park , B	ldg 200, Ste	400 South Gree Number Street	enville Av	e
				ksonville	FL	32256	Richardson	TX	75081
			City		State	Zip Code	City	State	Zip Code
		How long employed th	nere?	Novemb	er 2017		10 Years		

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

			For Deptor 1	non-filing spouse
2.	List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.	2.	\$4,489.33	\$4,505.33
3.	Estimate and list monthly overtime pay.	3. +	\$0.00	\$0.00
4.	Calculate gross income. Add line 2 + line 3.	4.	\$4,489.33	\$4,505.33

Official Form 106l Schedule I: Your Income page 1

Deb	tor 1	Ervin Frank Layer		Case nur	nbe	r (if knowr	ո) <u>17</u>	<u>-326</u>	670-13
				For Debtor 1	-	or Debto)	
	Сор	by line 4 here	4.	\$4,489.33		\$4,50	5.33	_	
5.	List	all payroll deductions:							
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$780.39			<u> 95.76</u>		
	5b.	Mandatory contributions for retirement plans	5b.	\$0.00			6.54		
	5c.	Voluntary contributions for retirement plans	5c.	<u>\$0.00</u>			0.00		
	5d.	Required repayments of retirement fund loans	5d.	\$0.00			0.00		
	5e.	Insurance	5e.	\$0.00			3.23		
	5f.	Domestic support obligations	5f.	\$0.00			0.00		
	5g.	Union dues	5g.	\$0.00			0.00		
	5h.	Other deductions. Specify: See continuation sheet	5h.+	\$0.00		\$11	4.98		
6.		I the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5h.	6.	\$780.39		\$1,16	<u> </u>		
7.	Cald	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$3,708.94		\$3,34	14.82		
8.		all other income regularly received:							
	8a.	Net income from rental property and from operating a business, profession, or farm	8a.	\$1,272.00			0.00		
		Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.							
	8b.	Interest and dividends	8b.	\$0.00		\$	0.00		
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive	8c.	\$0.00		•	0.00		
		Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.							
	8d.	Unemployment compensation	8d.	\$0.00		9	0.00		
	8e.	Social Security	8e.	\$0.00			0.00		
	8f.	Other government assistance that you regularly receive							
		Include cash assistance and the value (if known) or any non- cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.							
		Specify:	8f.	\$0.00		\$	0.00		
	8g.	Pension or retirement income	- 8g.	\$0.00			0.00		
	8h.	Other monthly income.		· · ·					
		Specify: 2nd Income	8h.	÷ <u>\$0.00</u>		\$8	33.73		
9.	Add	l all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.	9.	\$1,272.00		\$8	33.73		
10	Cald	culate monthly income. Add line 7 + line 9.	10.	£4.090.04	. Г	¢2.41	00 EE	ا _ [¢9.400.40
10.		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$4,980.94	+	\$3,42	20.55]=[\$8,409.49
11.	Stat	te all other regular contributions to the expenses that you list in Soude contributions from an unmarried partner, members of your househ	chedu	ıle J.		ammataa	and at	har	
		nds or relatives.	ioiu, y	our dependents, you	11 10	Ommates,	, and ot	ICI	
	Do r	not include any amounts already included in lines 2-10 or amounts tha	t are r	not available to pay	expe	enses liste	ed in Sc	hed	ule J.
	Spe	cify:					11.	+	\$0.00
12.	Add	I the amount in the last column of line 10 to the amount in line 11.	The	result is the combine	ed m	onthly	12.		\$8,409.49
	inco	ome. Write that amount on the Summary of Your Assets and Liabilities applies.						L	Combined
40			h:- •	2				1	monthly income
13.	`	you expect an increase or decrease within the year after you file the	nis to	rm /					
	☑	No. None.							
		Yes. Explain:							

Deb	tor 1	Ervin Frank L	ayer			Case	number (if known)	17-32	670-13
1.	Additio	onal Employers	Debtor 1			Debtor 2 or	non-filing spouse		
	Occupa	ation				Teacher			
	Employ	yer's name					Baptist Church		
	Employ	yer's address				3933 NW H	ighway		
						Dallas		TX	75225
			City	State	Zip Code	City		State	Zip Code
	How lo	ong employed th	ere?			<u>10</u>	Years		
5h	Other F	Payroll Deduction	ne (dataile)			For Debtor 1	For Debtor 2 non-filing sp		
JII.		•	iis (uctalis)				644	00	
	Life in	surance					\$14.	.98	
	<u>Annui</u>	ties					\$100.	.00_	
					Totals:	\$0.00	\$114.	.98_	

Debtor 1 Ervin Frank Layer		Case number (if known)	17-32670-13
8a. Attached Statement (Debtor 1)			
	Ervin Layer Law Office		
Gross Monthly Income:			\$1,776.00
Expense	Category	Amount	-
Rent	Rent	\$50.00	
Miscellaneous	Business Expense	\$130.00	
Projected Income Tax	Projected Income Tax	\$324.00	
Total Monthly Expenses			\$504.00
Net Monthly Income:			\$1,272.00

Ē	ill in this inforn	nation to ide	entify y	your case:			Cho	ck if this	, io:		
	Debtor 1	Ervin		Frank	Layer				ended filing		
		First Name		Middle Name	Last Na		🛭	A supp	lement showing		
	Debtor 2 (Spouse, if filing)	First Name		Middle Name	Last Na	ime			r 13 expenses a ng date:	is of the	
	United States Bank	ruptcy Court fo	rthe: N	NORTHERN DI	STRICT OI	F TEXAS		MM / D	D / YYYY	_	
	Case number	17-32670-1	_					IVIIVI / D	<i>D7</i> 1111		
Ļ	(if known)						_				
	fficial Form 10										
	chedule J: Yo										12/15
nai	rrect information. I	f more space	is neede Answer	ed, attach anoth every question	er sheet to t	ing together, both ar his form. On the top					
1.	Is this a joint cas										
	✓ No. Go to lir ✓ Yes. Does I ✓ No	ne 2. Debtor 2 live in		rate household?		s for Separate Housel	hold of	f Debtor	2.		
2.	Do you have dep		☐ No	s. Fill out this in	formation	Dependent's relati Debtor 1 or Debtor		p to	Dependent's	Does dep	
	Debtor 2.	i and	for	each dependent	t	Daughter	. <u> </u>		age 13	_ <u>iive witii j</u> ☐ No	your
	Do not state the d	ependents'				Daughter			12	Yes No	
						Wife				Yes No Yes	
										No Yes No	
3.	Do your expense expenses of peo yourself and you	ple other than	i	✓ No Yes						- ∏ Yes	
Ŀ	Part 2: Estima	ate Your On	ngoing	Monthly Exp	enses						
to		of a date afte	r the ba		-	re using this form as supplemental Sche					
	lude expenses pai					ı know the value of cial Form 106l.)			Your expens	ses	
4.	The rental or hor Include first mortg							•	4		
	If not included in		,	5 **							
	4a. Real estate t	axes						4	4a		
	4b. Property, hor	meowner's, or r	enter's ir	nsurance					4b		
	4c. Home mainte	enance, repair,	and upk	eep expenses					4c	\$1	00.00
	4d. Homeowner's	s association o	r condon	ninium dues					4d.		

Deb	otor 1 Ervin Frank Layer	Case number (if known)	17-32670-13
		Your e	expenses
5.	Additional mortgage payments for your residence, such as home equity loans	5	
6.	Utilities:		
	6a. Electricity, heat, natural gas	6a	\$350.00
	6b. Water, sewer, garbage collection	6b	\$200.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c	\$488.00
	6d. Other. Specify:	6d	
7.	Food and housekeeping supplies	7	\$1,000.00
8.	Childcare and children's education costs	8	\$16.00
9.	Clothing, laundry, and dry cleaning	9	\$200.00
10.	Personal care products and services	10	\$200.00
11.	Medical and dental expenses	11	\$50.00
12.	Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12	\$400.00
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13	\$200.00
14.	Charitable contributions and religious donations	14	\$400.00
15.	Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.		
	15a. Life insurance	15a	\$32.00
	15b. Health insurance	15b.	\$500.00
	15c. Vehicle insurance	15c.	\$206.00
	15d. Other insurance. Specify:	15d.	
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	16.	
17.	Installment or lease payments:		
	17a. Car payments for Vehicle 1	17a	
	17b. Car payments for Vehicle 2	17b.	
	17c. Other. Specify:	17c	
	17d. Other. Specify: Pet Expense	17d.	\$75.00
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	
19.	Other payments you make to support others who do not live with you. Specify:	19	

Deb	tor 1	Ervin Frank Layer	Case number (if known)	17-32670-13
20.		r real property expenses not included in lines 4 or 5 of this form or on dule I: Your Income.		
	20a.	Mortgages on other property	20a	
	20b.	Real estate taxes	20b	
	20c.	Property, homeowner's, or renter's insurance	20c	
	20d.	Maintenance, repair, and upkeep expenses	20d	
	20e.	Homeowner's association or condominium dues	20e	
21.	Other	r. Specify: See continuation sheet	21. +_	\$851.00
22.	Calcu	alate your monthly expenses.		
	22a.	Add lines 4 through 21.	22a	\$5,268.00
	22b.	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2.	22b	
	22c.	Add line 22a and 22b. The result is your monthly expenses.	22c	\$5,268.00
23.	Calcu	ulate your monthly net income.		
	23a.	Copy line 12 (your combined monthly income) from Schedule I.	23a	\$8,409.49
	23b.	Copy your monthly expenses from line 22c above.	23b. _ _	\$5,268.00
	23c.	Subtract your monthly expenses from your monthly income. The result is your monthly net income.	23c	\$3,141.49
24.	Do yo	ou expect an increase or decrease in your expenses within the year after you	file this form?	
		xample, do you expect to finish paying for your car loan within the year or do you e ent to increase or decrease because of a modification to the terms of your mortga	. ,	
		No.		
	Ø	Yes. Explain here: Health Insurance Expense is estimate going through open enroll	ment	

Debtor 1	Ervin Frank Layer	Case number (if known)	17-32670-13
21. Other.	Specify:		\$140.00
Tutor			\$100.00
Ballet	t/Violin		\$225.00
YMCA	A		\$76.00
Knigh	nts of Columbus		\$45.00
Schoo	ol Supplies/Field Trips		\$65.00
Parkii	ng Garage Expenses	_	\$200.00
		Total:	\$851.00

Fill in this inf	ormation to	identify your case	:	
Debtor 1	Ervin First Name	Frank Middle Name	Layer Last Name	
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bar	nkruptcy Court f	or the: NORTHERN D	ISTRICT OF TEXAS	
Case number (if known)	17-32670-13			Check if this is amended filing
Official Form	106Dec			
Declaration	About an	Individual Debt	or's Schedules	

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below	
Did you pay or agree to pay someone w	ho is NOT an attorney to help you fill out bankruptcy forms?
☑ No	
Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
	have read the summary and schedules filed with this declaration and that they are
true and correct.	
X /s/ Ervin Frank Layer	x
Ervin Frank Layer, Debtor 1	Signature of Debtor 2
Date <u>12/20/2017</u>	Date
MM / DD / YYYY	MM / DD / YYYY

12/15